

\*BIBDATASHEET\*

CONFIRMATION NO. 4790

Bib Data Sheet

|                                    |   |                          |                               |                                       |
|------------------------------------|---|--------------------------|-------------------------------|---------------------------------------|
| <b>SERIAL NUMBER</b><br>10/622,566 | <b>FILING DATE</b><br>07/21/2003<br><br><b>RULE</b> | <b>CLASS</b><br>716 / 19 | <b>GROUP ART UNIT</b><br>2825 | <b>ATTORNEY DOCKET NO.</b><br>829-613 |
|------------------------------------|---|--------------------------|-------------------------------|---------------------------------------|

**APPLICANTS**

Kiyoshige Ohmori, Kyoto-shi, JAPAN;

**\*\* CONTINUING DATA**   N     VS  

**\*\* FOREIGN APPLICATIONS**   Y     VS  

JAPAN 2002-212945 07/22/2002

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

**\*\* 10/20/2003**

|  |                                  |                             |                           |                                |
|--|----------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance met<br>Verified and Acknowledged <u>                    </u><br>Examiner's Signature Initials | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>10 | <b>TOTAL CLAIMS</b><br>14 | <b>INDEPENDENT CLAIMS</b><br>4 |
|--|----------------------------------|-----------------------------|---------------------------|--------------------------------|

**ADDRESS**

23117  
 NIXON & VANDERHYE, PC  
 1100 N GLEBE ROAD  
 8TH FLOOR  
 ARLINGTON, VA  
 22201-4714

**TITLE**

Method for creating mask pattern for circuit fabrication and method for verifying mask pattern for circuit fabrication

|                                   |  |   |
|-----------------------------------|--|---|
| <b>FILING FEE RECEIVED</b><br>834 | <b>FEES:</b> Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------------|--|---|